PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10626271

CLAIMS AS FILED - PART I (Column 1)					(Column 2)			SMALL ENTITY TYPE			OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS			8				F	RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			⊘ minus 20=		*		\[\frac{1}{2}	K\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		* 1			X42=		OR	X84=	81
MU	ILTIPLE DEPEN	IDENT CLAIM P	RESENT				+	-140=		OR	+280=	
* If the difference in column 1 is less that				zero, enter "0" in colui		olumn 2	L_ To	OTAL		OR	TOTAL	836
	CI	LAIMS AS A	MENDED - PART II								OTHER	
(Column 1)				(Colur	mn 2)_	(Column 3)	S	SMALL ENTITY			SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	×	(\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=	5	X42=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							140			+280=	
								140= TOTAL		OR	+280= TOTAL	
								DIT. FEE		OR	ADDIT. FEE	L
		(Column 1) CLAIMS		(Colui		(Column 3)		·····				155
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**		=	×	(\$ 9=		OR	X\$18=	
AME!	Independent	*	Minus	***		=	;	X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						╵┝	140=		OR	+280=	
		L	TOTAL			TOTAL	<u> </u>					
								OIT. FEE		OR	ADDIT. FEE	
_	(Column 1) (Column 2) (Column 3									י ו		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO	IBER	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	×	(\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	i -	X42=			X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEPENDENT		T CLAIM		╿┝	\7Z=		OR	7,04≃	
* If the potavia polyment is locathon the potavia polyment of white following 2										OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											TOTAL ADDIT. FEE	
		ımber Previously P nber Previously Pa							propriate bo			